STATE OF OREGON
WATER SUPPLY WELL REPORT
(as required by ORS 537.545 & 537.765 and OAR 690-205-0210)

HARN 53128
12/5/2023

WELL I.D. LABEL# L	125151
START CARD #	1071706
ORIGINAL LOG #	HARNEY 52662

(1) LAND OWNER

Owner Well I.D. _____

First Name JERRY & LINDA Last Name MILLER
Company _____
Address P O BOX 796
City CRANE State OR Zip 97732

(2) TYPE OF WORK

☐ New Well ☒ Deepening ☐ Conversion
☐ Alteration (complete 2a & 10) ☐ Abandonment(complete 5a)

(2a) PRE-ALTERATION

	Dia	+	From	To	Gauge	Stl	Plstc	Wld	Thrd
Casing:		☐				○	○	☐	☐

	Material	From	To	Amt	sacks/lbs
Seal:	Cement	0	412	349	Sacks

(3) DRILL METHOD

☒ Rotary Air ☐ Rotary Mud ☐ Cable ☐ Auger ☐ Cable Mud
☐ Reverse Rotary ☐ Other _____

(4) PROPOSED USE

☐ Domestic ☒ Irrigation ☐ Community
☐ Industrial/ Commericial ☐ Livestock ☐ Dewatering
☐ Thermal ☐ Injection ☐ Other _____

(5) BORE HOLE CONSTRUCTION

Special Standard ☐ (Attach copy)

Depth of Completed Well 1538.00 ft.

BORE HOLE Dia	From	To	SEAL Material	From	To	Amt	sacks/lbs
10	0	1538					
					Calculated		
					Calculated		

Seal placement method: ☐ A ☐ B ☐ C ☐ D ☐ E ☐ Other: _____
Backfill placed from _____ ft. to _____ ft. Material _____
Filter pack from _____ ft. to _____ ft. Material _____ Size _____
Explosives used: ☐ Type _____ Amount _____
Seal Placement Begin Date _____ Begin Time _____

(5a) ABANDONMENT USING UNHYDRATED BENTONITE

Proposed Amount Actual Amount

(6) CASING/LINER

Casing	Liner	Dia	+	From	To	Gauge	Stl	Plstc	Wld	Thrd
●	○	10	☐	390	633	.250	●	○	☒	☐
○	○		☐				○	○	☐	☐
○	○		☐				○	○	☐	☐
○	○		☐				○	○	☐	☐
○	○		☐				○	○	☐	☐

Shoe ☐ Inside ☒ Outside ☐ Other Location of shoe(s) 633
Temp casing ☐ Yes Dia _____ From _____ + ☐ _____ To _____

(7) PERFORATIONS/SCREENS

Perforations Method _____
Screens Type _____ Material _____

Perf/ Screen	Casing/ Screen Liner	Dia	From	To	Scrn/slot width	Slot length	# of slots	Tele/ pipe size

(8) WELL TESTS: Minimum testing time is 1 hour

○ Pump ○ Bailer ● Air ○ Flowing Artesian

Yield gal/min	Drawdown	Drill stem/Pump depth	Duration (hr)
10		1530	1.5

Temperature 56 °F Lab analysis ☐ Yes By _____
Water quality concerns? ☐ Yes (describe below) TDS amount 270 ppm

From	To	Description	Amount	Units

(9) LOCATION OF WELL (legal description)

County HARNEY Twp 26.00 S N/S Range 35.00 E E/W WM
Sec 3 NW 1/4 of the NE 1/4 Tax Lot 300
Tax Map Number _____ Lot _____
Lat ___ ° ___ ' ___ " or 43.34635409 DMS or DD
Long ___ ° ___ ' ___ " or -118.39486225 DMS or DD
○ Street address of well ● Nearest address

48293 CRANE VANETA LANE CRANE,OR

(10) STATIC WATER LEVEL

	Date	SWL(psi)	+	SWL(ft)
Existing Well / Pre-Alteration	10/25/2023		☒	2
Completed Well	11/14/2023		☐	417

Flowing Artesian? ☐ Dry Hole? ☐

WATER BEARING ZONES Depth water was first found _____

SWL Date	From	To	Est Flow	SWL(psi)	+	SWL(ft)
11/14/2023	571	1538	10		☐	417
					☐	
					☐	
					☐	
					☐	

(11) WELL LOG

Ground Elevation _____

Material	From	To
Clean out Harn 52662 bit hit at 585	0	585
Gray Green Clay and Dice rocks Cleanout	585	680
reaming cleanout Brown Tan	680	748
maroon clay stone congl clean out	748	770
Brown tan clay st congl cemented rocks	770	780
hard rotation reaming bit and stablizer	780	876
Midd Rock gray black some maroon	876	1090
clay stone seems black seems	876	1090
Rock with brown clay / Clay Stone Congl	1090	1170
Brown Broken rock - clay stone	1170	1230
fractured rock with clay stone brown	1230	1260
green black gray	1230	1260
Corse sands - sandstone Congl	1260	1390
Fractured gray Congl/ green gray Rock	1390	1538
Note switched to try cone 1230 deep	1390	1538

Construction
Begin Date 10/25/2023 Begin Time 07 49 End Date 11/14/2023

(unbonded) Water Well Constructor Certification

I certify that the work I performed on the construction, deepening, alteration, or abandonment of this well is in compliance with Oregon water supply well construction standards. Materials used and information reported above are true to the best of my knowledge and belief.

License Number _____ Date _____

Signed _____

(bonded) Water Well Constructor Certification

I accept responsibility for the construction, deepening, alteration, or abandonment work performed on this well during the construction dates reported above. All work performed during this time is in compliance with Oregon water supply well construction standards. This report is true to the best of my knowledge and belief.

License Number 1970 Date 12/5/2023

Signed NEIL FAGEN (E-filed)

Contact Info (optional) 541-548-1245